

Access to Recovery Voucher Management System USER GUIDE For Care Coordination Providers



October 2015

Table of Contents

Pg. 3Introduction
Pg. 4Getting Started
Pg. 5Home Page
Pg. 6Client List
Pg. 7Adding Client
Pg. 8Gain Short Screener
Pg. 9Intake Transaction/ATR Client Outcomes Tool
Pgs. 10- 11 GPRA Intake Interview/GPRA Discharge Interview
Pg. 12Setting up a Voucher
Pg. 13Adding Services to a Voucher
Pg. 14Editing/Reopening/Closing a Voucher
Pg. 15Entering an Encounter
Pg. 16Adjusting/Reversing Encounter (Claim Item)
Pg. 17Completing a Case
Pg. 18Referring a Client/Transferring a Client
Pg. 19Creating a Consent
Pg. 20Creating a Referral
Pg. 21Creating a Referral Voucher
Pg. 22Viewing Incoming Referrals
Pg. 23Viewing Outgoing Referrals/Accepting a Referral
Pgs. 24-25Appendix A – GPRA Follow-up Due/Discharge Due Lists/Service Search Screen
Pgs. 26-29Appendix B – Reports (Payment List/Claims Reconciliation Report/Voucher
List/Encounter Data Report/SAIS Batch Error Report/Interview Compliance Report
Pgs. 30-33 Annendix B – GPRA Introduction/Information

Introduction

The Access to Recovery – Iowa (ATR) Voucher Management System (VMS) is a Web-based Infrastructure Treatment System (WITS) developed by FEI and purchased by the Iowa Department of Public Health (IDPH) to manage client involvement in ATR.

The VMS is used by:

- 1. Care coordination providers
- 2. Recovery support service (RSS) providers
- 3. Iowa Department of Public Health staff
- 4. FEI

The VMS is used for the following activities:

- 1. Record client profile information (name, address, contacts)
- 2. Input GPRA interview data to submit to the Substance Abuse and Mental Health Services Administration (SAMHSA)
- 3. Input client voucher information
- 4. Send referrals from care coordination to recovery support service providers
- 5. Enter encounters when client services are provided
- 6. Manage grant funds available for client vouchers
- 7. View reports to manage client records and program expenditures

The VMS consists of two separate Web sites:

- 1. Training Site: used by all providers of ATR in order to learn the system. The training site does not contain real client information
- 2. Production Site: once training has occurred, and the organization is ready to begin providing ATR covered services, an account is created for them on the production site. The production site is the "live" site in which actual client information is entered

Technical Assistance:

ATR Training Site:

https://iaatr-training.witsweb.org/p#stay

ATR Production Site:

https://iaatr.witsweb.org/p#stav

Technical Assistance:

866-923-1085

ATR Information:

http://idph.iowa.gov/atr

Getting Started

- 1. Contact IDPH ATR staff to set up an ATR training. The ATR training must be completed prior to providing ATR services).
- 2. Provide IDPH ATR staff with the following:
 - i. First and Last Name of each staff member that will provide ATR covered services
 - ii. E-mail address of each staff member that will provide ATR covered services
- IDPH ATR staff will establish an account for each 3. individual providing ATR services on the VMS Training Site
- Provider staff members will receive the following: 4.
 - i. E-mail from the ATR VMS with Username, Password and Pin
 - ii. Welcome e-mail from IDPH with instructions
- 5. Provider staff should login to the ATR Training Site with the username, password and PIN that was sent to them
- 6. At the first login, users are to change their password and PIN to something they can remember (Please write down and keep your username, password and PIN!)
- 7. Be sure to bring your login, password and PIN to any ATR VMS training

Throughout the VMS, you will see the following buttons:

Cancel

Clears all information entered and returns to the previous screen



Takes you to the previous screen



Takes you to the next screen



Saves the information on the current screen

Finish

Saves the information on the current screen and returns you to the most recent list screen

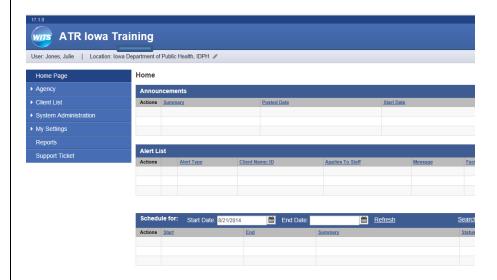
(Export)

Allows user to export the corresponding information into a Microsoft Excel spreadsheet



Hover over the pencil under "Actions" to get Review to pop up.

Home Page



Announcements:

1. The Announcement field will contain contact information for technical assistance

Alert List:

1. The Alert List field will contain provider specific alerts.

Schedule:

1. Providers have the ability of maintaining an ATR-specific schedule in order to track client appointments, follow up interviews, etc.

User, Loc and Client:

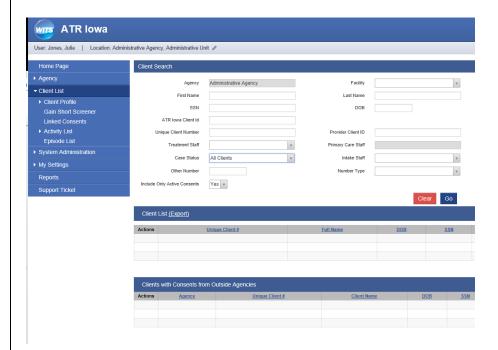
1. User: indicates what user is logged in

2. Loc: indicates agency and facility

Menu List:

- 1. Home Page: allows you to return to the home page
- 2. Agency: contains information about billing and agency profile
- 3. Client List: access to client files
- 4. System Administration: provides system information
- 5. My Settings: allows user to change facility and password
- 6. Reports: provides billing and other various reports

Client List



Client Search:

- 1. Search criteria include Name, Social Security Number, Client ID, etc. Choose any search criteria and click Go
- 2. To search ALL clients, do not select any search criteria and click **Go**
- 3. To search by "Client with ATR2, ATR3, or ATR4 Cases", or "Clients with Closed Cases", or "Clients with No Case History", or "Clients with Open Cases", click on the pull down next to Case Status and highlight the choice you want. Then click Go

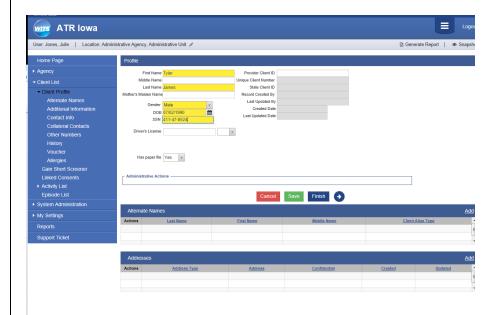
Client List:

- 1. Review the Client List (the Client List is automatically alphabetized by the last name of the client; you may change the sort order by clicking on the column title: Client ID, Full Name, DOB, SSN, Gender)
- 2. Under the Actions column, click on **Profile** or **Activity List** (depending on what actions you wish to make)

Clients with Consents from Outside Agencies:

1. Clients that have signed consents from ATR Care Coordination providers will appear in this list

Adding a Client



Adding a Client from ATR2 or ATR3:

- 1. Go to Client List
- 2. Change the pull down under Case Status to show "All Clients"
- 3. Put in Client's last name
- 4. Click **GO**
- 5. Go to Profile next to Client's name
- 6. Update the Client Profile information
- 7. Go through same steps as entering in new client after that.

Adding a Client:

- 1. To enter a new client into the ATR VMS, click Add Client
- 2. Complete the Client Profile

Client Profile:

- 1. Complete the client profile by entering information on the following pages:
 - a. Client Profile
 - b. Alternate Names
 - c. Additional Information must fill out Veteran Status.
 - d. Contact Info (be sure to record the client phone number)
 - e. Address Info (must enter at least one address)
 - f. Collateral Contacts (can be entered on VMS instead of using the Collateral Contacts paper form in the ATR Provider Manual) Other Numbers (ATR VMS creates the ATR client I-SMART ID number shown here)

- 2. ALL YELLOW FIELDS ARE **REQUIRED**
- 3. White fields are not necessarily required, but may be helpful to complete (e.g., phone number, language, collateral contacts)

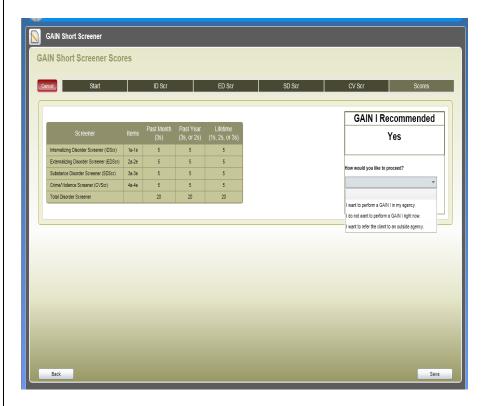
History:

- 1. By selecting **History** under Client Profile, all the actions taken in this client file are shown on one screen
- 2. Date, Staff Person and Description for each action is indicated

Gain Short Screener



Note: The first time a GAIN Short Screener is entered you may be prompted to download Microsoft Silverlight. Please contact your agency's IT Department/Person to assist you in installing Microsoft Silverlight onto your computer.

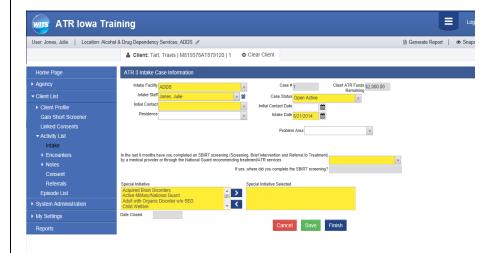


Adding a GAIN Screen:

- 1. Click on **GAIN Short Screener** link on the left side of the ATR VMS window
- 2. Click on Create
- 3. There are several screens to complete. ALL FIELDS ARE REQUIRED. Click Continue to advance to the next screen.
- 4. Once all questions have been answered, the GAIN Short Screener will indicate "YES" or "NO" and ask you how you want to proceed. Select the appropriate response.
- 5. Click on Save

Intake Transaction

Prior to the client receiving services, an Intake Transaction must be entered into the ATR VMS



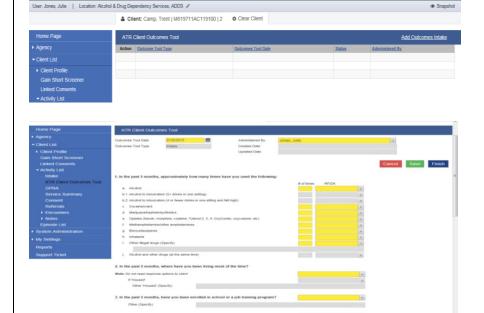
Complete Intake Case Information:

- 1. Complete the required fields:
 - a. Initial Contact
 - b. SBIRT screening questions
 - c. Special Initiative (Active Military/National Guard; Child Welfare; Co-Occurring; Drug Court; and None)
- 2. Non-required fields (optional)
- 3. Click **Finish** and return to **Activity List**

ATR Client Outcomes Tool

ATR lowa Training

Must do the Outcomes Tool before going on to do the GPRA.



Asset Clarify Recurring on status during most of the year 5 months, determining whether claims unless all or had a register job but was off with 2" others a revocked, full time" in 82 and includes 'employed, full filmed' in 88.4 and includes a full filmed in 88.4 an

Complete Outcomes Tool Information:

- 4. ALL YELLOW FIELDS ARE **REQUIRED**
- 5. Click Finish and return to **Activity List**

GPRA Intake Interview

The GPRA Intake Interview is completed at the time the client is enrolled in ATR. It should be done at the same time as the ATR Assessment. Typically, this interview will last about 30-40 minutes. This interview is REQUIRED TO BE COMPLETED FACE-TO-FACE.

Note: The ATR covered service for which an encounter should be entered is the ATR Assessment with GPRA Intake Interview (this covers the client's eligibility screening, ATR assessment, paperwork completion, and GPRA Intake interview). A GPRA Intake Interview MUST be completed prior to the client receiving ATR services

GPRA Discharge Interview

The GPRA Discharge Interview is completed at the time the client leaves the ATR program. Typically, this interview will last about 20-30 minutes and is REQUIRED TO BE COMPLETED FACE-TO-FACE.

If the care coordinator is unable to locate the client (after several attempts in locating them) the care coordinator should complete the GPRA Discharge Interview as an Administrative Discharge (see below).

Note: When entering the GPRA Discharge do not complete Section K, ATR VMS will automatically populate these fields. Click on the **Next arrow** until you get to the Summary and then click Finish.

Administrative Discharge:

After 30 days of no activity (no encounters entered) the client MUST be discharged. The care coordinator has 14 days to locate the client in order to conduct the face-to-face interview. If the care coordinator is unsuccessful in locating the client during those 14 days, the care coordinator should do an Administrative Discharge. Care Coordinators may not bill for Administrative Discharges.

To complete the Intake GPRA Interview, click:

- 1. Activity List
- 2. GPRA
- 3. Add GPRA Intake
- 4. Complete the interview (refer to the Question-by-Question Guide for instructions regarding the interview)
- 5. The answer to "Client Type"; the answer is ALWAYS "Treatment Client"
- 6. Click Finish when complete

To complete the GPRA Discharge Interview, click:

- 1. Activity List
- 2. **GPRA**
- 3. Add GPRA Discharge
- 4. Complete the interview
- 5. Click **Finish** when complete

To complete an Administrative Discharge, click:

- 1. Activity List
- 2. **GPRA**
- 3. Add GPRA Discharge
- 4. On the first screen of the Discharge record, answer "Was an interview conducted?" (the answer is No)
- 5. Complete the other required fields
- 6. Click Finish when complete

GPRA Follow up Interview

The GPRA Follow up Interview is completed between 5 and 8 months after the client's intake into the ATR program. Typically, this interview will last about 20-30 minutes.

A face-to-face meeting is preferred however this interview may be completed by phone.

The client will receive a \$30 gift card from the care coordination provider when they complete the interview within the required time frame (the gift card is reimbursed as part of the "Care Coordination with GPRA Follow up" rate).

GPRA Follow Up Interview Guidelines:

- 1. GPRA Follow up Interviews can only be completed between five months and eight months after intake
- 2. Care coordination providers can only receive ATR reimbursement when the interview is conducted face-toface or by telephone during this time frame
- 3. When clients complete the Follow up interview during the required time frame, they should receive their \$30 gift card and the care coordinator should document in the client file
- 4. The REQUIRED GPRA Follow Up Rate is 80%

Conducting both GPRA Discharge and Follow Up Interviews at the same time:

SAMHSA allows GPRA Discharge and Follow-up interviews conducted at the same time. This may occur ONLY if the client leaves the ATR program between five months and eight months after intake. The following guidelines should be followed:

- 1. Care coordinators can conduct ONE interview instead of two
- 2. Care coordinators will enter the interview responses in the GPRA Follow-up and responds "yes" to the question "would you like to create a GPRA Discharge"
- 3. ATR VMS will automatically create the GPRA Discharge.
- 4. Both services may be billed to IDPH

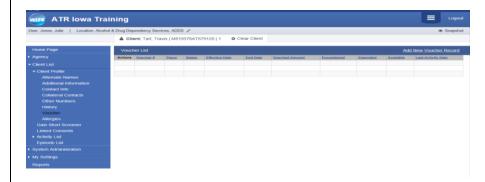
To complete the GPRA Follow-up Interview, click:

- 1. Activity List
- 2. GPRA
- 3. Add GPRA Follow-up
- 4. Complete the interview
- 5. Click Finish when completed

Example: John Smith enters the ATR program on July 16th. At that time, John's care coordinator asks him for "collateral contacts" in case he can't be located to complete the interview. They should also schedule his followup interview and give John a reminder card, letting him know he will receive a \$30 gift card when the follow up is completed. The care coordinator should maintain regular contact with John (using Care Coordination sessions) in order to remind him of his follow-up appointment. On his interview date of January 20th, John completes his interview and receives his \$30 gift card.

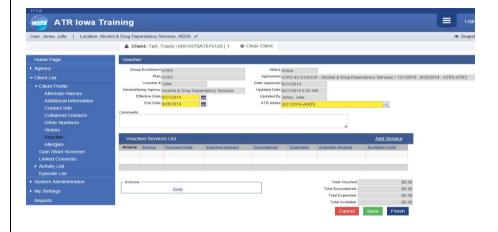
For more information regarding **GPRA Follow Up Interviews, see** Appendix B.

Setting up a Voucher



The client is to have **ONE** active voucher for each agency he/she is receiving services.

Care Coordinators should set up a voucher for services when the client is enrolled into ATR. Vouchers must be created before services are provided.



To set up a voucher for services at the Care Coordination agency:

- 1. Click on Client Profile, then **Voucher**
- 2. Click Add New Voucher Record

Complete the following fields:

- 1. Effective Date: must be the date of intake (leave this date as it is)
- 2. End Date: the date the voucher will expire. This date is set automatically to 90 days past the Effective Date. Vouchers can be active for a maximum of 90 days. Care coordinators should review ATR services with the client toward the end of the 90 day period. At that time, the care coordinator may:
 - a. Change the End Date to extend an additional 90 days, or
 - b. Allow the voucher to expire (if client is leaving the ATR program)
 - c. Care coordinators may re-open the voucher after it expires.
- 3. Click Save

Adding Services to a Voucher



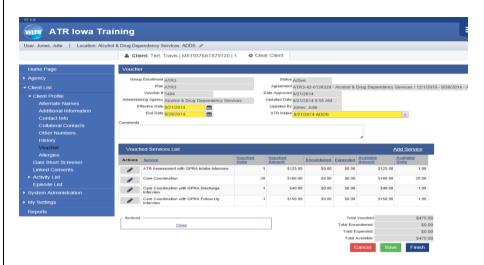
After the voucher is created, the Care Coordinator adds the services to the voucher that the client will be receiving at the Care Coordination agency.

This voucher must include:

- a) ATR Assessment with GPRA Intake Interview
- b) Care Coordination
- c) Care Coordination with GPRA Discharge Interview
- d) Care Coordination with GPRA Follow Up Interview

Ensure that care coordination services (listed above) are on the client's voucher so that those funds are available while the client is involved in the program.

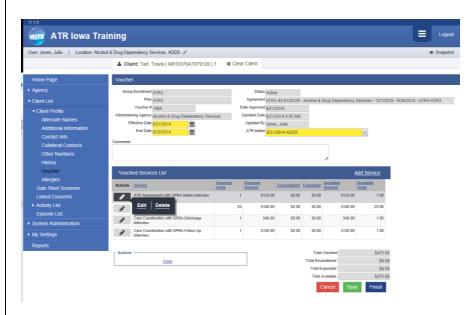
The VMS is set up to automatically "cap" a client voucher at the total units/\$'s available to them in ATR.



To add services to a voucher:

- 1. Click Add Service on the **Voucher Profile**
- 2. Select **Service** and choose from the list of services your organization is able to provide (these services are based on the IDPH Cooperative Agreement)
- 3. Enter # Vouched Units according to the number of units to be provided to the client over the course of their involvement with ATR. (Refer to the Provider Manual on unit definition and limits.)
- 4. Click Save and repeat the process for each service the client is to receive at the care coordination agency
- 5. Review the summary of services listed on the client voucher (see below left)

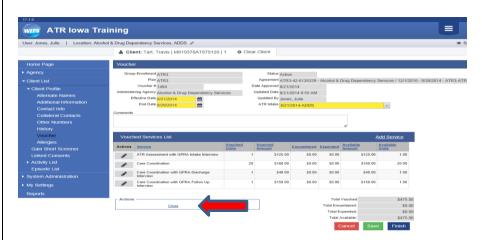
Editing a Voucher



Care Coordination Providers may change the client voucher when client needs change. Follow the steps listed to the right to make changes to the voucher for services at care coordination providers.

Reopening/Closing a Voucher

Care coordinators may close client vouchers as needed. Do not close a voucher unless the client will no longer be receiving ATR services from your agency.



To edit services to a voucher:

- 6. Hover over the pencil under the Actions, next to the service you want to edit and click on
- 7. Enter # Vouched Units that you are editing the service to. (Refer to the Provider Manual on unit definition and limits.)
- 8. Click **Save** and repeat the process for each service that needs to be edited
- 9. Review the summary of services listed on the client voucher
- 10. You can delete a service if the service has not been expended at all. Hover over the pencil under Actions, next to the service you want to delete and click on **Delete**

To reopen a voucher:

- 11. Go to the voucher list hover over the pencil under actions and click on profile.
- 12. Under Administrative Actions at the bottom of the screen you will see an option to Reopen click on that.
- 13. Go to the End Date and change the date to be several days out, not exceeding 90 days.
- 14. Click **Save** and then click **Finish**

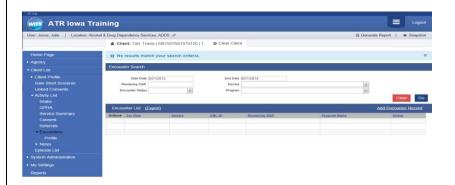
To close a voucher:

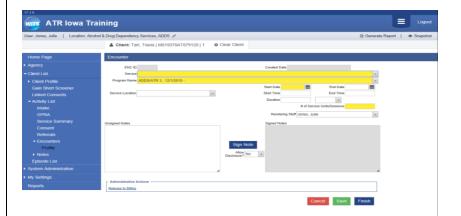
- 15. Click **Close** under the under Administrative Actions
- 16. You will be asked "Are you sure you want to Close this Authorization", click Yes
- 17. Click Finish

Entering an Encounter

An Encounter is entered each time an ATR service is provided to a client. Encounters indicate what service was provided, the service date, service units provided, and a note documenting the service provided.

An Encounter must be entered within 7 calendar days of the date the service was provided.





On the Encounter Record, the yellow fields are required (see the instructions on the right side of this page). White fields may also be completed. IDPH requires documentation be kept for each service provided to the client, including the required fields on the Encounter (service, start date, units provided) and a progress note that show services were provided in accordance with the ATR Provider Manual. Progress Notes are to be recorded directly on the Encounter Record under "Notes."

To enter an Encounter, click:

- 1. Activity List
- 2. Encounters
- 3. Add Encounter Record

The following fields must be completed:

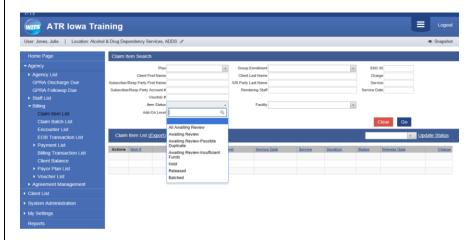
- a. **Service**: select the service that the client has available on the voucher
- b. Start Date: enter the date the service was provided
- c. # of Service Units/Sessions: enter the number of units provided (refer to the ATR Provider Manual for unit specifications)
- d. Unsigned Notes: must be filled out to enter case / progress notes and then click on Sign Note

Fields that may be completed, but are not required:

- a. End Date: record if the encounter covers more than one day (e.g., housing assistance)
- b. Start Time / End Time: record these times for documentation-purposes
- c. **Duration**: record duration of service
- 4. Click **Save**
- 5. Click Release to Billing (this must be done in order for the Encounter to be sent for payment (as a claim item) and appear on the Payment List and/or Claims Reconciliation billing reports.

Adjusting / Reversing Encounter (Claim Item)

A Claim Item may be adjusted or reversed after it has been saved and released to billing. To ensure accuracy in the information that is maintained in the ATR VMS and uploaded to SAMHSA, errors in billing must be adjusted to accurately reflect services that were provided.



Once the Encounter's claim item is adjusted or reversed, it will not appear on the Claims Reconciliation Report as adjusted or reversed until the following day (the data is processed and updated nightly).

If your agency has received payment for an Encounter that you are adjusting/reversing, increase or decrease the billing amount on the next General Accounting Expenditure (GAX) form. Make a note on that GAX indicating that an adjustment was made and for which month.

To adjust or reverse Claim Item click:

- 1. Agency
- 2. Billing
- 3. Claim Item List
- 4. Enter "Client First Name" and "Last name"
- 5. Change "Item Status" from "All Awaiting Review" to BLANK
- 6. **Go**
- 7. **Profile** hover over the pencil under Actions, next to the selected Encounter (Claim Item)

Under Administrative Actions, choose one of the following:

- 1. Reverse: select if the encounter was mistakenly entered
 - a. Click **Yes** when prompted
- 2. Adjust: select in order to increase or decrease the number of units entered
- 3. Click Yes when prompted
- 4. Enter the correct number of units
- 5. Reject (Back Out): select to delete the claim item (this option will only appear on the same day as the Encounter was entered)
 - a. Click **Yes** when prompted

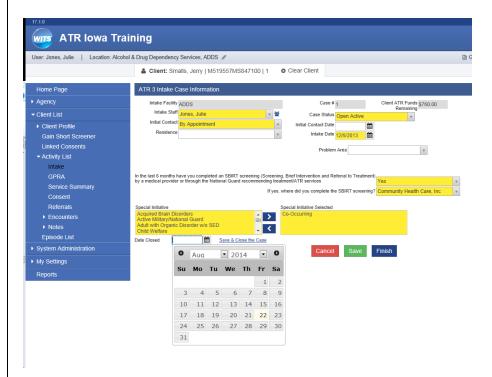
NOTE: If no options appear under Administrative Actions, the Voucher has been closed. Re-open the Voucher in order to adjust / reverse the Encounter.

Completing a Case

Care Coordinators are responsible for closing a client's case. By closing a case, all the vouchers will close and no other activity may take place in the client record.

The client case should only be closed AFTER the GPRA Discharge and GPRA Follow-up interviews are completed.

If the case was closed by mistake, contact IDPH staff to re-open.



To close a client's case, click:

- 1. Activity List
- 2. Intake
- 3. Enter the date under the field "Date Closed"
- 4. Click Save & Close the Case

Referring a Client

Referrals are created by Care Coordinators in order for clients to receive services at organizations outside of the Care Coordination Provider.

After the client chooses the services and providers of those services (generally, a client must have at least TWO options from which to choose within a 150 mile radius), the care coordinator will:

- 1. Complete a Consent Record
- 2. Contact the referral organization to ensure the appropriateness of the referral
- 3. Complete a Referral record, and
- 4. Create a Referral Voucher

Note: Referrals should not be created for services that are to be provided by the Care Coordination Provider. Those services should be added to the Care Coordination Voucher.

Transferring a Client

Transfers are only created by Care Coordinators in order for client to receive services at another Care Coordination Agencies for the following reasons:

- 1. Client is moving to another county and it's too far for the client to stay with original Care Coordinator.
- 2. Client has a conflict of interest with the original Care Coordinator.

The steps you will follow in a transfer are:

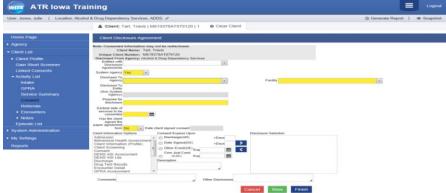
- 1. Original Care Coordination Agency will call the other agency to find out if they will accept the client transfer.
- 2. Original Care Coordination Agency will send in an Exception Request (see provider manual, Appendix K) for approval from the Iowa Department of Public Health and then once it's approved;
- 3. Original Care Coordination Agency will:
 - a. Complete a Consent Record
 - b. Contact the referral organization to ensure the appropriateness of the referral
 - c. Complete a Referral record

- 4. Once the referral has been completed in the VMS the **Original Care Coordination** Agency will then close the case out completely. (See closing a case on page 18)
- 5. The Original Care Coordination Agency will also send out a report of what the client has spent to the referring agency so they can create their own voucher on what has is left for the client to spend. This report can be on the Claims Reconciliation Report. Put the client's name in and export.

Creating a Consent

A Consent Record must be created prior to the Referral or Referral Voucher. Consent records are verifications that the client has authorized releasing their ATR related information to another organization. Consents can also be used for the **Collateral Contacts and be entered on the system.** **Agencies can enter as many Collateral Contacts in the system as deem necessary by the agency.





To enter Consent for Collateral Contacts:

Complete the following fields:

- 1. System Agency: select No
- 2. **Disclosed to Entity**: enter person's name
- 3. Purpose for disclosure: enter "ATR Collateral Contact"
- 4. Earliest Date of Services: enter today's date
- 5. Consent Date: enter the date the consent begins
- 6. Has the client signed the paper agreement form?: if the client has signed a Release of Information, select "Yes" (must be "Yes" before a Referral record can be completed)
 - Generate Report: select this option in order to print and have the client sign an ATR VMS-generated consent
- 7. Client Information Options: this will pre-fill so the Consent expires upon the date of discharge

To enter Consent for Referral:

(for each organization the client is to be referred), click:

- 1. Activity List
- 2. Consent
- 3. Add New Client Consent Record

Complete the following fields:

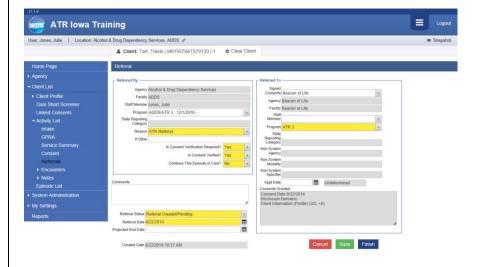
- 8. **Disclosed to Agency**: select the referral agency
- 9. **Purpose for disclosure**: enter "ATR Referral"
- 10. Consent Date: enter the date the consent begins
- 11. Has the client signed the paper agreement form?: if the client has signed a Release of Information, select "Yes" (must be "Yes" before a Referral record can be completed)
 - **Print Report**: select this option in order to print and have the client sign an ATR VMS-generated consent
- 12. Client Information Options: this will pre-fill so the Consent expires upon the date of discharge
- 13. Click Save

Creating a Referral

After saving the Consent record, click "Create Referral Using this Disclosure Agreement."



This will open the Referral record.



To complete a Referral record, click:

- 1. Activity List
- 2. Referrals
- 3. Add New Client Referral Record

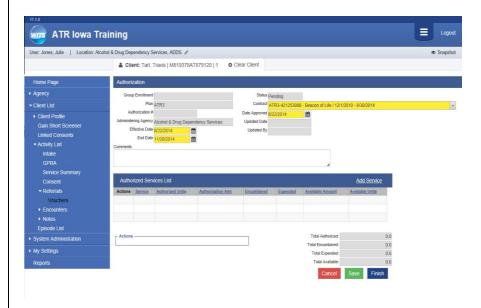
Complete the following fields:

- 14. Reason: select ATR Referral or ATR Transfer (only if client is going to another Care Coordination Center)
- 15. Is Consent Verification Requested?: select Yes
- 16. Is Consent Verified?: if the client has signed, or will sign, a paper Release of Information, select Yes
- 17. Continue This Episode of Care?: select Yes
- 18. Referral Status: do not change
- 19. Referral Date: change only if referral date should be different
- 20. Signed Consents: choose the selected agency from the list of consents in the system (if you came directly from the Consent record, this will be pre-filled)
- 21. Facility: choose the facility of the agency you selected for this referral
- 22. Appt Date: if you have arranged an appointment for the client to be seen at the referral agency, you may record that date here
- 23. Comments: you may type notes in this field that will be shared with the referral agency when they view the record
- 24. Click Save

Creating a Referral Voucher

Care Coordinators are responsible for creating vouchers that will allow clients to receive services at referral agencies. The Care Coordinator must create a Referral Voucher that will be sent along with the Referral record.





It is important to communicate with the referral agency before establishing the number of units on the Referral Voucher. The services and units can be changed at a later date by the Care Coordinator based on the needed services at the referral agency. To create the Referral Voucher from the Referral record screen, click

- 1. **Vouchers** (on the menu under Referrals)
- 2. Add New Authorization Record

To access the Referral Voucher screen when not on the Referral record screen, click:

- 1. Activity List
- 2. Referrals
- 3. Review (next to the appropriate referral)
- 4. **Vouchers** (on the menu under Referrals)
- 5. Add New Authorization Record

See Setting up a Voucher to setup the Referral Voucher

See Adding Services to a Voucher to add services to the Referral Voucher

See Changing a Voucher to increase / decrease units or delete a service from the Referral Voucher

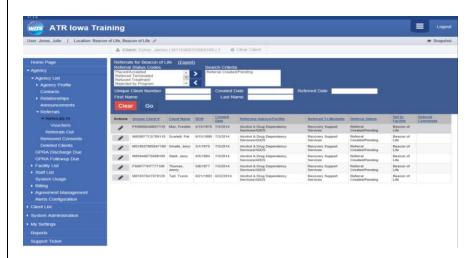
See Closing a Voucher for instructions on how to close the Referral Voucher

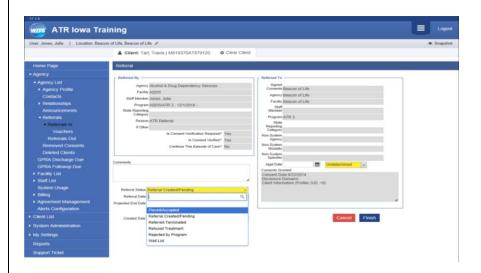
See Re-opening a Voucher to re-open the Referral Voucher

Viewing Incoming Referrals

An indication that a referral has been made to your organization will appear on your homepage (e.g. "There are currently 5 people that have been referred in").







Note: Leave the "Referral Status" as "Referral Created/Pending" until the client and/or care coordinator has made contact with you. At that time, change the "Referral Status" to "Placed/Accepted" in order to provide services to the client.

To view referrals received by your organization, click:

- 1. Agency
- 2. Referrals
- 3. Referrals In
- 4. Change search criteria (by selecting the criteria and clicking the right arrow) or leave blank
- 5. **Go**
- 6. Review (next to the client that you wish to access)

Review the Referral Profile that will indicate the referring agency and staff person.

- 1. Change the Referral Status field to one of the following:
 - a. Placed / Accepted: to accept the client
 - b. Refused Treatment: if the client decided to not come to your agency
 - c. Rejected by Program: to not accept this client
- 2. Finish (this will direct you to the Client Profile)

Viewing Outgoing Referrals

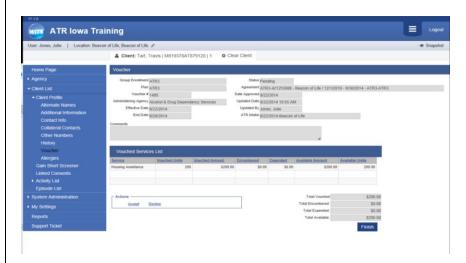
Referrals that have been created by your agency may be viewed using the instructions below.

To view the referrals made by your organization, click:

- 1. Agency
- 2. Referrals
- 3. Referrals Out

Accepting a Referral

Once the Referral is "Placed / Accepted" (see the preceding page for instructions), you will be directed to the Client Profile. Prior to providing services to the client, the Referral Voucher must be accepted.



ATR Service Providers are to communicate changes to client services to the client's Care Coordination provider, including:

- 1. Need for increased services units on client's voucher
- 2. Client ceasing services at your agency
- 3. Client has not followed through with services
- 4. Closed Voucher

Once the Referral Voucher is accepted, services may be provided.

To view the Referral Voucher, click:

- 1. Voucher (on the Menu under Client Profile)
- 2. **Profile** (on the right-side of the screen under Actions)

View the Referral Voucher details, including services and units.

Select one of the following:

- 2. Accept: choose this option if you plan for the client to receive services at your agency (the services on this voucher may always be changed by the Care Coordinator at a later date according to the needs of the client)
- 3. **Decline**: only choose this option if the client will not be provided ATR services at your agency

Appendix A – GPRA Follow-up Due/Discharge Due **Lists/Service Search Screen**

GPRA Follow up Due List



The GPRA Follow Up Due List helps Care Coordination Providers track GPRA Follow-ups that are completed, upcoming, and due. Select the type of information you would like by clicking on the down arrow next to the Follow-up Attendance. Client names will first appear 5 months after their intake date and remain on the list until the interview is completed, or until 8 months after the intake date. This screen defaults to "within window" and "ATR 3".

Note: This screen is very helpful to monitor GPRA Follow Up interviews and should be used by the Care Coordination provider very frequently.

If the client is referred to another care coordination provider for non-care coordination services (e.g. Integrated Therapy), the client will appear on both agency's GPRA Follow up Due Lists. However, the Care Coordination Provider is responsible for completing the interview. And, the client won't be taken into consideration when configuring the referral agency's GPRA Follow up rate.

To view the GPRA Follow Up screen, click:

- 1. Agency
- 2. GPRA Follow Up Due
- 3. Pull down Follow up Attendance and select the option you wish to view.
 - a. ALL
 - **b.** Due
 - **c.** Missed
 - d. New
 - e. Non-Compliant
 - f. Upcoming
 - g. Within Window
- 4. **Go**

Note: See ATR Interview Compliance Report for more information on page 30.

GPRA Discharge Due List



The GPRA Discharge Due screen helps Care Coordination Providers see the names of ATR clients that have not had any activity in the last 30 days and need a GPRA Discharge Interview completed. This screen defaults to "ATR 3."

It is helpful for agency's to monitor the "Last Activity Date" in order to maintain compliance with discharge policy (i.e. if today is December 30th and you want to track 21 days of no activity then enter 12-9-10 in the "Last Activity Date" field).

To view the GPRA Discharge Due screen, click:

- 1. Agency
- 2. **GPRA Discharge Due**
- 3. **Go**



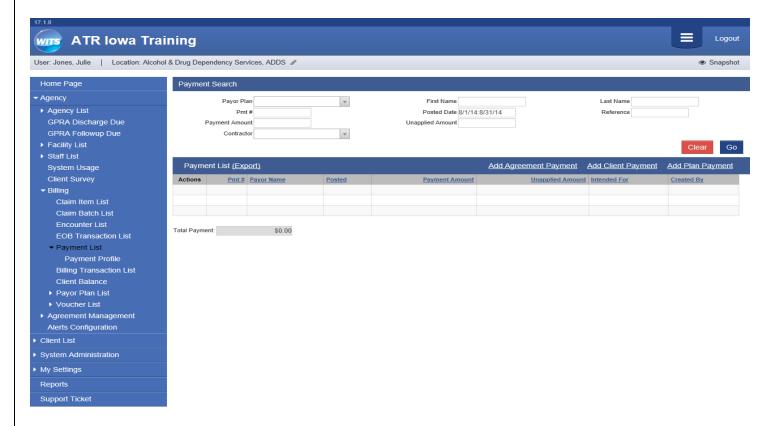
The ATR VMS provides a way for providers to search for services that are available in their area, or another area of the state. To search by service or city:

- 1. Click on **Agency**, then Agreement Management, then **Service Summary**
- 2. Click on the down arrow next to Service and/or City, make sure the Grant field says ATR3
- 3. **Go**

Appendix B – Reports

Payment List

At the end of each month use the Payment List to have the ATR VMS generate the total amount of services provided. This total is entered on the General Accounting Expenditure (GAX) form and submitted to IDPH for payment.



To use the **Payment List** click:

- 1. Agency
- 2. Billing
- 3. Payment List
 - a. Enter "month-date-year:month-date-year" (e.g., 12-1-10:12-31-10) in the Posted Date field
 - b. Click Go
 - c. All claim items and reversals will be listed and the Total Payment field at the bottom of the screen will contain the claim total for the month.
 - d. The **Payment List** can be exported in an Excel format.
- 4. Enter the Total Payment amount on the GAX

Claims Reconciliation Report

The Claims Reconciliation Report can be used to search for claim items (encounters released to billing). This report can also be used to track client services.

To run the Claims Reconciliation to search for client information, click:

- 1. Reports
- 2. Claims Reconciliation
- 3. If searching by client, enter the Clients First Name and/or Last Name; If searching for the Adjudicated Date enter From: first date of the month and To: last date of the month
- 4. **Go**
- 5. **Export** the file into an Excel spreadsheet



Voucher List

A client may have multiple vouchers at many ATR provider agencies. To view all the vouchers for a client, use the **Voucher List Report**. This report will show each voucher, the provider agency, and the voucher and expended amounts.

To run the Voucher List report, click:

- 1. Agency
- 2. Billing
- 3. Voucher List
- 4. Enter the client information to limit the search (name, ID number, etc)
- 5. **Go**

Encounter Data Report

The Encounter Data Report may be used to determine Encounters that were not "Released to Billing." This report should be run prior to the Claims Reconciliation Report. Encounters must be "Released to Billing," to appear on the Claims Reconciliation Report.

To run the Encounter Data report, click:

- 1. Reports
- 2. Encounter Data
- 3. Change "Released to Billing" to "No"
- 4. On Screen or Export

Services Accountability Improvement System (SAIS)

ATR data is uploaded to SAMHSA on a daily basis. This information is uploaded through SAIS and includes GPRA, voucher information, and encounter data. Mistakes in entering information in the ATR VMS can result in errors. To ensure information has been uploaded successfully, run the SAIS Batch Error report on a regular basis.

To run the SAIS Batch Error report, click:

- 1. System Administration
- 2. SAIS Batch Errors
- 3. **Go**
- 4. Review any records in which the Record Status indicates "Rejected"
- 5. **Fix** (next to the rejected records)
- 6. Complete the change or edit that the report indicates.
- 7. Check the report the following day to ensure the successful upload

Contact IDPH staff if you are unclear as to the reason of the error.

ATR Interview Compliance Report

Care Coordination Providers may review their current GPRA Follow Up rate information by using the ATR **Interview Compliance Report**. The report includes the following:

- Compliant: follow up interviews that were entered within the correct timeframe (5-8 months)
- Due: follow up interviews that may currently be completed (within the 5-8 month window)
- Non-Compliant: follow up interviews that were entered, but entered outside of the 5 to 8 month window
- Missed: follow up interviews not entered and the 5 to 8 month window has passed

The GPRA Follow Up Compliance Rate is configured based on the above numbers.

To run the ATR Interview Compliance Report, click:

- 1. Reports
- 2. ATR Interview Compliance Report
- 3. On Screen

Appendix C – Government Performance and Results Act (GPRA)

Government Performance and Results Act (GPRA)

Introduction:

GPRA interviews are required for each client involved in Access to Recovery – Iowa. GPRA interviews collect information from the client through the administration of the GPRA data collection tool. Care Coordination Providers are required to conduct three GPRA interviews with each client. The information obtained during the GPRA interviews must be entered into the ATR VMS GPRA module. A paper GPRA interview form (CSAT GPRA Client Outcomes form) is available on the ATR website, and can be completed with the client, however the data must still be entered into the ATR VMS.

The three GPRA interviews are conducted with the client at:

- 1. Intake (when the client enters the ATR program)
- 2. **Discharge** (when the client leaves the ATR program)
- 3. Follow-up (between 5 and 8 months after the client is enrolled in ATR)

Interview Guidelines:

- 1. Ask ALL QUESTIONS AS THEY APPEAR ON THE FORM Explain to the client the purpose of the interview is to obtain their information and that it is required to ask the full question (even though the answer may be obvious or already known)
- 2. You cannot click Save and return to the interview later SAMHSA requires the interview be completed in one sitting. If you click Cancel, your entry will not save.

Techniques to Track Clients for GPRA

- 1. ATR providers the client has received services from
- 2. Mail contacts
 - a. Regular mail
 - b. E-mail
- 3. Telephone contacts
 - a. Client's phone numbers
 - b. Collateral contacts phone numbers
 - c. Free directory assistance:

800-Free-411 800-Goog-411

- Internet searches
 - a. www.phonenumber.com
 - b. http://internetpeoplesearch.com
 - c. www.virtualgumshoe.com
 - d. www.infobel.com
- 5. Home visits
- 6. Public information sources
- 7. Specialized institutional information systems
 - a. Federal Bureau of Prisons: 202-307-3126
 - b. Federal Prison Inmate Records: www.bop.gov/inmate.html
 - c. Iowa Department of Corrections: www.doc.state.ia.us/OffenderInfo.asp
 - d. County jail records
- 8. ATR staff for technical assistance: 866-923-1085

Ethics and Confidentiality

- 1. Always maintain client confidentiality
- 2. Know your organization's policies
- 3. Know your Federal, State, and Tribal laws
- 4. When calling individuals without a client-signed release of information:
 - a. Do not identify your agency
 - b. Block what appears when you make outgoing calls (e.g. *67)
 - c. If you leave a message, say that you are trying to conduct an information interview (or research interview) with the client

DO NOT BREAK YOUR CLIENT'S CONFIDENTIALITY

Scripts for Locating Clients by Telephone:

SCRIPT #1 - Reaching the Client:

Interviewer (you): "Hello, my name is and I am calling from [name of Provider Agency]. *Make sure the name* does not include reference to ATR services or substance abuse treatment. May I speak with [name]?"

Answer: "This is [name]."

Interviewer: "You may remember that you took part in an intake interview with us about [time] ago. It's time for the follow-up interview and since we've not been able to schedule a face to face interview, I'd like to complete it with you now." The client may volunteer information about the previous interview such as the location or interviewer's name.

Interviewer: "In order to protect your confidentiality, I need to confirm that I'm speaking to the right person [name]. What is your date of birth? (Client responds). Fine, and what are the last four digits of your social security number?" (Client responds). Fine, we will begin the interview."

If the client is unable to provide adequate validation of his/her identify, stop the conversation at this point. Explain to the client that you are only allowed to discuss the study with an identified participant. You may leave a message for the client to call back for more information.

IMPORTANT: Many clients will be hesitant to respond to unsolicited phone calls and may use family members, etc. as "gatekeepers" over the phone. If the client is available, refer to script #1. Be sure to write down any information that comes up during a telephone conversation (e.g., work hours, the name of someone who might know where the client is, how long it has been since the client moved away, etc.).

SCRIPT #2 - Reaching a Family Member, Roommate, etc.

Scene A:

Interviewer: "Hello, my name is ____ and I am calling from [name of Provider Agency]. Make sure the name does not include reference to ATR services or substance abuse treatment. May I speak with [name]?"

Answer: "What's this about?"

Interviewer: "[name] has been participating in a research/health study and we are trying to contact him for a follow-up interview. Is he available?"

Answer: "No, he's not here."

Interviewer: "Can you tell me when the best time is to call back and talk to him?"

Answer: "I don't know when he'll be around."

Interviewer: "Can I leave a message for him? He agreed to participate in our study and it's important that we reach him." Leave a message that only refers to the research/health study follow-up interview and the number for the client to call for more information. Always thank the person for their time.

Scene B:

Interviewer: "Hello, my name is ____ and I am calling from [name of Provider Agency]. Make sure the name does not include reference to ATR services or substance abuse treatment. May I speak with [name]?"

Answer: "He doesn't live here anymore."

Interviewer: "Can you tell me how I might reach him? He gave us this number so we could get in touch with him."

Answer: "I can't tell you anything more."

Interviewer: "Could you please take a message for him? He agreed to continue to participate in our study and it's important that we reach him." If the respondent still has contact with the participant, leave a message using the guidelines above. If there is no longer any contact, refer to other phone numbers/sources on the locator.

SCRIPT # 3 - Leaving a Voice Message

Often the client's locator phone number will be valid, but the client is not home when called.

Interviewer: "Hello, this message is for [name]. This is ____ and I'm calling from [name of Provider Agency]. You participated in our research/health study about [time ago]. We would like to schedule the follow-up interview with you. To schedule an interview, or to receive more information, please call us at [number]. You can reach us between [hours]. Thank you, we look forward to hearing from you."